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PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	NA
Filing Date	7-2-03
First Named Inventor	Gilstrap
Title	Seatpost Mounted Bicycle Wheel
Group Art Unit	NA Holding Device
Examiner Name	NA
Attorney Docket Number	KG-0006

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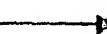
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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Keith Gilstrap
Signature	
Date	6-16-03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name *Kathy Gilstrap Doug Galenz*
Signature *[Signature]*
Date *6-12-03*

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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E4926994079 US

PTO/SB/01 (10-01)

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	KG-0006
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)		First Named Inventor	Gilstrap
COMPLETE IF KNOWN			
Application Number		NA /	
Filing Date		7-2-03	
Art Unit		NA	
Examiner Name		NA	

As the below named Inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Seatpost Mounted Bicycle Wheel Holding
Device

(Title of the Invention)

the specification of which

 is attached hereto

OR

 was filed on (MM/DD/YYYY) as United States Application Number or PCT InternationalApplication Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) *Keith*

Family Name
or Surname *Gilstrap*

Inventor's
Signature

Date

Residence: City *Glenwood Springs* State *CO* Country *USA* Citizenship *USA*

Mailing Address *1818 Colorado Ave. #103*

City *Glenwood Springs* State *CO* ZIP *81601* Country *USA*

NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) *Doug*

Family Name
or Surname *Golenz*

Inventor's
Signature

Date *6-12-03*

Residence: City *Louisville* State *CO* Country *USA* Citizenship *USA*

Mailing Address *942 Sunflower Street*

City *Louisville* State *CO* ZIP *80027* Country *USA*

Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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		Art Unit	NA
		Examiner Name	NA

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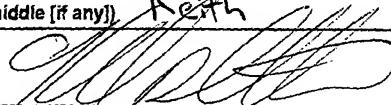
Given Name
(first and middle [if any])

Keith

Family Name
or Surname

Gilstrap

Inventor's
Signature



Date

6-16-03

Residence: City Glenwood Springs State CO Country USA Citizenship USA

Mailing Address 1818 Colorado Ave. #103

City Glenwood Springs State CO ZIP 81601 Country USA

NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any])

Dong

Family Name
or Surname

Golenz

Inventor's
Signature

Date

Residence: City Louisville State CO Country USA Citizenship USA

Mailing Address 942 Sunflower Street

City Louisville State CO ZIP 80027 Country USA

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